ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD
1740 W. ADAMS ST., SUITE 4600, PHOENIX, ARIZONA 85007
PHONE (602) 364-1PET (1738) FAX (602) 364-1029
VETBOARD.AZ.GOV

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Initial:

# COMPLAINT INVESTIGATION FORM

*If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian*

PLEASE PRINT OR TYPE

**FOR OFFICE USE ONLY**

Date Received: June 16, 2022 Case Number: 22-139

**A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:**

Name of Veterinarian/CVT: Jessica Bertrand DVM / Brandi Stanley CVT

Premise Name: VCA Apache Animal Hospital

Premise Address: 1700 S Hwy 92, Ste F&G

City: Sierra Vista State: AZ Zip Code: 85635

Telephone: (520) 458-0930

**B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*:**

Name: Daniel J. Torres

Ad[redacted]

C[redacted] Zip Cod[redacted]

Home Telephon[redacted] Cell Telepho[redacted]

**STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.*

**C. PATIENT INFORMATION (1):**

Name: Bonnie Torres

Breed/Species: Belgian Malinois/ Great Pyrenes

Age: 11 months Sex: Female Color: Black and Beige

**PATIENT INFORMATION (2):**

Name: _____

Breed/Species: _____

Age: _____ Sex: _____ Color: _____

**D. VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:**

*Please provide the name, address and phone number for each veterinarian.*

I can't provide that information, i just have their names and work phone number.

Jesssica Bertrand DVM - (520) 458-0930

Brandi Stanley CVT - (520) 458-0930

**E. WITNESS INFORMATION:**

*Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.*

Jeannie Andrada - [redacted]

Daniel Torres - [redacted]

## Attestation of Person Requesting Investigation

By signing this form, I declare that the information contained herein is true and accurate to the best of my knowledge. Further, I authorize the release of any and all medical records or information necessary to complete the investigation of this case.

Signature: _____

Date: _____

Foreword

I joined VCA's Pup Care Club sometime last year, the program "perks" included all vaccines, exams, and the spay procedure with the monthly sub fee. The VCA notified me on my previous visit on Feb. 7th that Bonnie is ready for her spay and its due for Feb. 26th. The day of Feb. 7th I informed my boss that I will need to take a LOA to watch my dog for 2 weeks starting on Feb. 26th.

Tuesday. February 22th

I get a text notification alerting me that the next day is Bonnie's operation. After 1 pm I only let Bonnie drink water so to have her stomach clear of any debris.

Wednesday. February 23th

Only gave Bonnie some water then I drove over to the VCA at 7:00 am for her appointment, I arrived, they weighed her and then took her to the back and informed me she'll be ready by 3pm or sooner.

I get a call at 1:40pm letting me know she's ready to go home, once i arrive bonnie is still lethargic from the medications and the front desk clerk gives me an information packet along with a baggie with anti- inflammatory and pain pills, and lastly informing me they used dissolvable sutures to close the incision.

I get home and start my 2 week stay at home.

Friday. February 25th

Around 3pm I am at my house just laying down with Bonnie on my couch and I realize her incision looks bulbous and heavily inflamed and was leaking fluid steadily. So i refer to the information packet and it says all these symptoms are normal, just make sure the dog is not active, taking the meds and resting. Which i was avidly making sure of.

Since the fluid is continually leaking it made me think of all the other dogs i have that haven't had this problem but decided if her symptoms do not lessen by the next morning that ill take her to be inspected.

Saturday. February 26th

When i woke up the next morning around 7:30am I immediately noticed the swelling has not reduced whatsoever and i even noticed the very southmost stitch has come undone allowing the fluid to spill out rapidly, (I took a picture)

So in my concern I called the VCA and let them know that Bonnie's incision does not look normal and if there's any meds I can use to keep her from moving so as to not disrupt her incision anymore,They okayed the use of trazadone in small doses to help. I scheduled a followup exam for 3 hours later the same day.

Once it was 11am I arrived at the VCA and took bonnie into the lobby area, I was met by a female provider (of whom i don't know the name) i told her basically everything that was happening, i'm not sure if they were in a rush but she seemed to brush it off and quickly took

bonnie to a exam room applied a very miniscule amount of "skin adhesive" which all of about 3 minutes, assured me everything was normal and sent me on me way.

Around 7pm I called Bonnie to see if she's ready to eat her food but I noticed she just wont move at all, so I gently tried to feed her more closely but she refused. My curiosity peaked so I slowly rolled her over on her back to reveal the incision is now a 1/4 of the way open along with her stomach tissue poking out through the open wound and it's incredibly inflamed. So I immediately googled the nearest 24 Hour Emergency Vet near me since my local VCA is a non 24 hr, the closest Emergency Vet was in Tucson, ironically another VCA around 80 miles away. So i called the Tucson VCA and let them know i was coming and i need attention asap. Then i wrapped medical gauze, tape, and plastic wrap around her wound to keep it compressed and somewhat sterile.

I arrived at the VCA at 10:40pm. They immediately came to my vehicle to retrieve Bonnie and to start the emergency procedure. I waited in the parking lot all night until she was ready around 9am. Around midnight a provider came to me with the final bill for the visit, They discharged her with the same kind of pills i got the initial surgery just more this time and they gave her standard non - dissolvable sutures

The Emergency Visit cost me roughly $1700 of money I didn't have, I had to resort to using multiple credit cards which crippled my credit score.
I'm seeking repayment of this emergency visit as this should have never even happened to begin with. If possible also the Care Club monthly fees from february to now, it makes zero sense to be paying for a $1200 all inclusive program and it doesn't even deliver.

**VCA Apache Animal Hospital**
1700 S. Highway 92
Sierra Vista, AZ 85635
**Tel.:** (520) 458-0930
**Fax:** (520) 458-0209

VCA Animal Hospitals
Division of VCA Antech Inc.

To Whom It May Concern:

Regarding Case 22-139

Patient Bonnie Torres originally came to our facility in October of 2021 and was signed up for our Care Club health and wellness plan with ovariohysterectomy (commonly called a Spay). We do our best to explain to clients that this is a wellness plan and does not cover medications or emergencies, but the plan does give them some discounts at our facility only.

Bonnie was triaged shortly after signing up for Care club for diarrhea post vaccines, and again in November for intoxication and in appropriate behavior. I believe that either of these incidences would have made it apparent to the client that the wellness plan does not cover emergencies or medications.

Bonnie had a technician appointment February 7th for pre spay blood work where no significant findings were seen on blood work and she was deemed healthy to proceed with spay. This was communicated to the client on February 8th via text message. Client did not call with any questions or concerns about the procedure.

February 23rd 2022 Patient present for ovariohysterectomy which was completed without incident or complication. I did not have any direct communication with the client on this day. Please see statement by Brandi Stanley, CVT.

I did not see Bonnie Torres again after February 23rd, 2022. Please see statement by Dr. Yolmari Denney, DVM.

Sincerely,

Dr Jessica Bertrand

Dr. Jessica Bertrand

Associate Veterinarian
VCA Apache Animal Hospital
1700 S. Hwy 92, Suite F & G
Sierra Vista, AZ 85635
Clinic phone: 520-458-0930
Clinic fax: 520-458-0209

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**DOUGLAS A. DUCEY**
- GOVERNOR -

**VICTORIA WHITMORE**
- EXECUTIVE DIRECTOR -

# ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

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## INVESTIGATIVE COMMITTEE REPORT

**TO:** Arizona State Veterinary Medical Examining Board

**FROM:** AM Investigative Committee: Carolyn Ratajack - Chair
Christina Tran, DVM
Robert Kritsberg, DVM
Jarrod Butler, DVM
Steven Seiler

**STAFF PRESENT:** Tracy A. Riendeau, CVT – Investigations
Marc Harris, Assistant Attorney General

**RE:** Case: 22-139
Complainant(s): Daniel Torres
Respondent(s): Jessica Bertrand, DVM (License: 7442)

**SUMMARY:**
Complaint Received at Board Office: 6/16/22
Committee Discussion: 11/1/22
Board IIR: 12/14/22

**APPLICABLE STATUTES AND RULES:**
Laws as Amended August 2018 (Lime Green); Rules as Revised September 2013 (Yellow).

On February 23, 2022, "Bonnie," an 11-month-old female Malinois mix was presented to Respondent for a spay procedure. The dog was spayed and discharged later that day.

On February 26, 2022, the dog was presented to Respondent's associate due to spay incision dehiscence and discharge. The wound was evaluated, cleaned and repaired with tissue adhesive. There was no evidence of abdominal wall dehiscence at that time and the dog was discharged.

Later that evening, the dog's incision dehisced further and the dog was taken to an emergency facility where surgical intervention was required.

**Complainant was noticed and appeared telephonically.**
**Respondent was noticed and appeared telephonically. Consulting veterinarian, Dr. Denney, appeared telephonically.**
**The Committee reviewed medical records, testimony, and other documentation as described below:**

- Complainant(s) narrative: *Daniel Torres*
- Respondent(s) narrative/medical record: *Jessica Bertrand, DVM*
- Consulting Veterinarian(s) narrative/medical record: *Yolmari Denney – Respondent's associate, DVM; Ash Chirco, DVM – VCA Valley Animal Hospital and Emergency Center*

**PROPOSED 'FINDINGS of FACT':**

1. On February 23, 2022, the dog was presented to Dr. Bertrand for a spay procedure. The dog had blood work performed earlier that month and revealed the dog was a surgical candidate. CVT Stanley went over the estimate that Complainant signed to review the procedures that were to be performed that day on the dog. She noted that he wanted the dog to be microchipped and have her dewclaws removed along with the spay procedure. CVT Stanley called Complainant to verify that he in fact wanted the dog microchipped and her dewclaws removed as they were not covered by his Care Club plan and there would be an additional cost. Complainant declined any and all services that were not covered by his Care Club plan.

2. The dog was pre-anesthetized with cerenia, dexdomitor and methadone; induced with propofol; intubated; and maintained on isoflurane and oxygen. An IV catheter was placed and the dog was started on Plasmalyte. Bupivacaine was administered for a local anesthesia. Dr. Bertrand entered the abdomen via ventral midline incision. Circumferential and transfixing ligations on ovarian and uterine vessels were made with 0 PDS. The linea was closed with 0 PDS – simple continuous; SQ was closed with 0 PDS – simple continuous; and the skin was closed with 2-0 PDS – intradermal. No sutures to be removed.

3. The dog recovered uneventfully - she was administered carprofen and methadone post surgery; the IV catheter was removed; and an Elizabethan collar was placed. CVT Stanley called Complainant to let him know the dog was in recovery and doing well. Later that day, Complainant picked up the dog. CVT Stanley went over the discharge instructions with Complainant and gave him a copy. The dog was brought out and she jumped on Complainant when she saw him – CVT Stanley reminded Complainant that it was important to restrict the dog's activity and keep the Elizabethan collar on at all times.

4. Complainant took time off work so he could stay home with the dog.

5. On February 25, 2022, Complainant noticed that the dog's incision was inflamed and had drainage. He referred to the discharge instructions which indicated these symptoms were normal and to keep the dog quiet. If the symptoms did not improve by the next day, Complainant would have the dog seen.

6. The next day, Complainant noted the incision site swelling had not reduced and the incision was open and draining. Complainant contacted Dr. Bertrand's premises to report that the dog's incision site was swollen, open and draining. CVT Stanley discussed Complainant's concern with Dr. Bertrand's associate, Dr. Denney; Dr. Denney requested to have Complainant text a picture of the dog's incision. Once the picture was received, Dr. Denney did not feel the incision was too inflamed or open, but requested the dog be brought in for evaluation.

7. CVT Stanley spoke with Complainant and informed him of Dr. Denney's recommendation for the dog to be seen even though the incision site did not appear too inflamed or draining. Complainant asked about getting a sedative for the dog – Dr. Denney agreed to prescribe Trazadone to help the dog rest. Complainant was provided an estimate for the prescription;

Complainant declined stating he had some at home and asked for a dose the veterinarian recommended; Dr. Denney provided an appropriate dose. Complainant agreed to bring the dog in later that day.

8. Later that day, Dr. Denney evaluated the dog. The caudal aspect of the spay incision had less than 1cm of skin that was unopposed, with very mild serosanguinous fluid. The serosanguinous fluid was cleaned away from the incision, the site was dried well and Dr. Denney applied tissue adhesive to close the skin. Dr. Denney stated in her narrative that there was no evidence at that time of abdominal wall dehiscence. The incision site had typical three day post op swelling, was not warm to the touch, and no redness or purulent discharge was noted.

9. CVT Stanley discharged the dog and reminded Complainant to keep the dog quiet and the Elizabethan collar on; he understood. She again offered to fill the prescription of Trazadone from Dr. Denney – Complainant declined.

10. Later that evening, Complainant noted the dog was not interested in eating therefore he looked at the dog's incision. The incision site was open further than previously and it appeared that tissue was exposed. Complainant wrapped the abdomen and found an emergency facility in Tucson to bring the dog in for evaluation.

11. The dog was presented to Dr. Chirco at VCA Valley Animal Hospital and Emergency Center for evaluation. Dr. Chirco removed the abdominal wrap Complainant placed on the dog and noted a moderate amount of serosanguinous fluid dripping from the dog's incision site. The incision was open approximately 2cm at the caudal aspect. Due to the amount of fluid and appearance of the tissue there was a concern that the dehiscence may have extended into the abdomen. Dr. Chirco recommended sedating the dog to explore the dehiscence; Complainant approved.

12. The dog was sedated and the dehiscence was explored; it was found to extend into the abdominal wall therefore the dog was intubated and converted to general anesthesia. The dog's abdominal incision was further explored and opened in its entirety. The abdominal wall surrounding the incision was thickened and no visible sutures were identified within the body wall or free floating within the abdomen. The uterine stump appeared normal. There were blood clots around the ovarian pedicles, but no active bleeding was seen. The abdomen was flushed and the abdominal wall was debrided. The incision site was closed and the dog was recovered. The dog remained in the hospital for a few hours to recover and was later discharged to Complainant with antibiotics.

**COMMITTEE DISCUSSION:**

The Committee discussed that they were appreciative of Complainants honesty; the dog did lick the incision site which can lead to incision dehiscence. Based on the incision opening completely a couple days later, the Committee considered a suture reaction could have been the cause of the dehiscence.

The dog was active despite being on trazadone and was licking the incision. Dr. Bertrand's procedure was correct and the suture material was appropriate. The Committee was disappointed that there was no interaction between Dr. Bertrand and Complainant before or after surgery. She did meet with him the days leading up to the surgery however.

The Committee discussed that at the emergency facility no sutures were found during the surgical exploration. However, the Committee felt if there were no sutures present there would have been a much bigger dehiscence and it would have been obvious. There was discussion around the size of the suture used to close the dog's abdomen and when the Elizabethan collar was actually placed on the dog. The Committee did not see any issues with Dr. Bertrand's care and treatment of the dog.

**COMMITTEE'S PROPOSED CONCLUSIONS of LAW:**

The Committee concluded that no violations of the Veterinary Practice Act occurred.

**COMMITTEE'S RECOMMENDED DISPOSITION:**

**Motion:** It was moved and seconded the Board:

***Dismiss this issue with no violation.***

**Vote:** The motion was approved with a vote of 5 to 0.

*The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.*

TR

Tracy A. Riendeau, CVT
Investigative Division